

ARIZONA FORM
140EZ

Resident Personal Income Tax Return (EZ Form)

1999

Your first name and initial 1		Last name	Your social security number
If a joint return, spouse's first name and initial 1		Last name	Spouse's social security number
Present home address - number and street, rural route 2	Apt. No.	Daytime telephone ()	IMPORTANT! You must enter your SSN(s) above.
City, town or post office	State	Home telephone 94 ()	
ZIP code 3		For DOR use only	

Filing Status Check one

4		Married filing joint return
5		Single

88

YOU CANNOT TAKE THE FAMILY INCOME TAX CREDIT IF YOU USE THIS FORM
IF YOU THINK YOU CAN TAKE THE FAMILY INCOME TAX CREDIT, SEE FORM 140A
DO NOT USE THIS FORM IF YOU DO NOT MEET THE GUIDELINES - SEE INSTRUCTIONS

81

82	4 month federal extension 82 D
CHECK ONE if filing under a federal extension:	6 month federal extension 82 F

Attach Payment on top of W-2

6 Federal adjusted gross income (from your federal return)	6		00
7 Standard deduction and personal exemption. If you checked filing status box 4 enter \$11,400; if you checked filing status box 5 enter \$5,700.	7		00
8 Arizona taxable income. Subtract line 7 from line 6.	8		00
9 Amount of tax from Optional Tax Rate Tables	9		00
10 Clean Elections Fund Tax Reduction. See instructions, page 4	10 1	<input type="checkbox"/> YOURSELF	10 2
11 Tax Reduction. Complete Worksheet on page 4 of the instructions.	11		00
12 Reduced tax. Subtract line 11 from line 9.	12		00
13 Clean Elections Fund Tax Credit. From worksheet on page 4 of the instructions	13		00
14 Balance of tax. Subtract line 13 from line 12. If line 13 is more than line 12, enter zero.	14		00

DO NOT USE THIS FORM IF CLAIMING ESTIMATED PAYMENTS

Attach W-2 Forms Here

15 Arizona income tax withheld during 1999	15		00
16 Amount paid with 1999 extension request (Form 204)	16		00
17 Total payments. Add lines 15 and 16	17		00
18 OVERPAYMENT. If line 17 is larger than line 14, subtract line 14 from line 17.	18		00
19 Voluntary contribution to the Citizens Clean Elections Fund.	19		00
20 Refund. Subtract line 19 from line 18. If less than zero, enter the amount owed on line 21.	20		00
21 AMOUNT OWED. If line 14 is larger than line 17, subtract line 17 from line 14. Enter the amount owed.	21		00

Make Checks Payable To: Arizona Department of Revenue Be sure to put your social security number on your check.

Sign Here

22 Enter last name(s) used in prior years if different from name(s) used in current year.			
I have read this return and any attachments with it. Under penalties of perjury, I declare that to the best of my knowledge and belief, they are true, correct and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.			
Your signature	Date	Occupation	
Spouse's signature	Date	Spouse's occupation	
Preparer's signature	Date	Firm's name (preparer's if self-employed)	
Preparer's TIN	Preparer's address		

If you are sending a payment with this return, mail to: Arizona Department of Revenue, PO Box 52016, Phoenix AZ 85072-2016.
 If you are expecting a refund, or owe no tax, or owe tax but are not sending a payment, mail to: Arizona Department of Revenue, PO Box 52138, Phoenix AZ 85072-2138.